\*

KNAPP HAVEN 725 KNAPP STREET CHETEK 54728 Ownershi p: Phone: (715) 924-4891 City Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/01): 99 Title 18 (Medicare) Certified? No Total Licensed Bed Capacity (12/31/01): 99 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/01: 96 Average Daily Census: 95

\*

County: Barron

Services Provided to Non-Residents	Age, Sex, and Primary Diagra	Length of Stay (12/31/01)	%				
Home Health Care Supp. Home Care-Personal Care	No	Pri mary Di agnosis	% 	Age Groups	%	Less Than 1 Year 1 - 4 Years	22. 9 50. 0
Supp. Home Care-Household Services	No	Developmental Disabilities	0. 0	Under 65	3. 1	More Than 4 Years	27. 1
Day Services Respite Care	No   No	Mental Illness (Org./Psy) Mental Illness (Other)	46. 9 3. 1	65 - 74   75 - 84	5. 2 29. 2		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0. 0	75 - 84   85 - 94	53. 1	********	******
Adult Day Health Care	No	Para-, Quadra-, Hemi plegic	1.0	95 & 0ver	9.4	Full-Time Equivale	
Congregate Meals Home Delivered Meals	Yes   Yes	Cancer Fractures	1. 0 1. 0	]	100. 0	Nursing Staff per 100 Re (12/31/01)	esi dents
Other Meals	Yes		11. 5	65 & 0ver	96. 9		
Transportation	No	Cerebrovascul ar	7. 3			RNs	12. 3
Referral Service Other Services	No   No	Di abetes Respi ratory	3. 1 4. 2	Sex	%   	LPNs Nursing Assistants,	2. 9
Provide Day Programming for	10	Other Medical Conditions	20. 8	Male	28. 1	Ai des, & Orderlies	39. 2
Mentally III	No		100.0	Female	71. 9		
Provide Day Programming for Developmentally Disabled	No		100. 0		100. 0		
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## Method of Reimbursement

		ledicare litle 18			edicaid itle 19		0ther		Pri vate Pay		Family Care			Managed Care						
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Diem (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi - dents	% Of All
Int. Skilled Care	0	0. 0	0	2	2. 6	112	0	0. 0	0	0	0. 0	0	0	0. 0	0	0	0.0	0	2	2. 1
Skilled Care	0	0.0	0	62	81.6	95	0	0.0	0	18	90.0	103	0	0.0	0	0	0.0	0	80	83. 3
Intermediate				12	15.8	78	0	0.0	0	2	10.0	103	0	0.0	0	0	0.0	0	14	14. 6
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0. 0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0. 0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Di sabl ed				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependen	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0. 0
Total	0	0.0		76	100.0		0	0.0		20	100.0		0	0.0		0	0.0		96	100. 0

KNAPP HAVEN

Other Locations

Total Number of Discharges

(Including Deaths)

Deaths

*****	****	*****	*****	****		****	****	. ~
Admissions, Discharges, and		Percent Distribution	of Residents'	Condi ti ons,	Servi ces	s, and Activities as of 1	2/31/01	
Deaths During Reporting Period	l							
		ľ		% Nee	edi ng		Total	
Percent Admissions from:		Activities of	%	Assi sta	nce of	% Totally	Number of	
Private Home/No Home Health	28. 6	Daily Living (ADL)	Independent	One Or 7	Two Staff	Dependent	Resi dents	
Private Home/With Home Health	0.0	Bathi ng	1.0	51	l. 0	47. 9	96	
Other Nursing Homes	14. 3	Dressing	10. 4	7:	1. 9	17. 7	96	
Acute Care Hospitals	48. 6	Transferring	33. 3	51	1.0	15. 6	96	
Psych. HospMR/DD Facilities	0.0	Toilet Use	25. 0	54	4. 2	20. 8	96	
Rehabilitation Hospitals	0.0	Eating	42. 7	45	5. 8	11. 5	96	
Other Locations	8.6	********	******	******	******	*******	******	**
Total Number of Admissions	35	Conti nence		% Spe	ecial Trea	tments	%	
Percent Discharges To:		Indwelling Or Externa	al Catheter	6. 3	Recei vi ng	Respi ratory Care	4. 2	
Private Home/No Home Health	0.0	Occ/Freq. Incontinent	t of Bladder	49. 0 F	Recei vi ng	Tracheostomy Care	0. 0	
Private Home/With Home Health	7. 9	Occ/Freq. Incontinent	of Bowel	20. 8 F	Recei vi ng	Sucti oni ng	0. 0	
Other Nursing Homes	7. 9			I	Recei vi ng	Ostomy Care	2. 1	
Acute Care Hospitals	21. 1	Mobility		F	Recei vi ng	Tube Feedi ng	1. 0	
Psych. HospMR/DD Facilities	0.0	Physically Restrained	i	8. 3 F	Recei vi ng	Mechanically Altered Die	ts 35.4	
Rehabilitation Hospitals	0.0	1				-		

3. 1

5. 2

Other Resident Characteristics Have Advance Directives

Receiving Psychoactive Drugs

Medi cati ons

79. 2

47.9

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

5.3

57. 9

38

Skin Care

With Rashes

With Pressure Sores

************************************											
	Ownershi p:				Si ze:		ensure:				
	Thi s		ernment	50	- 99	Ski	lled	Al l			
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci l	lities		
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	96. 0	84. 8	1. 13	86. 4	1. 11	85. 8	1. 12	84. 6	1. 13		
Current Residents from In-County	79. 2	58. 7	1. 35	69. 6	1. 14	69. 4	1. 14	77. 0	1. 03		
Admissions from In-County, Still Residing	54. 3	27. 8	1. 96	19. 9	2. 73	23. 1	2. 35	20. 8	2. 61		
Admissions/Average Daily Census	36. 8	58. 7	0. 63	133. 4	0. 28	105. 6	0. 35	128. 9	0. 29		
Discharges/Average Daily Census	40. 0	61.8	0. 65	132. 0	0. 30	105. 9	0.38	130. 0	0. 31		
Discharges To Private Residence/Average Daily Census	3. 2	18. 7	0. 17	49. 7	0.06	38. 5	0.08	<b>52.</b> 8	0.06		
Residents Receiving Skilled Care	85. 4	84.8	1.01	90. 0	0. 95	89. 9	0. 95	85. 3	1.00		
Residents Aged 65 and Older	96. 9	87. 6	1. 11	94. 7	1. 02	93. 3	1.04	87. 5	1. 11		
Title 19 (Medicaid) Funded Residents	79. 2	79.8	0. 99	68. 8	1. 15	69. 9	1. 13	68. 7	1. 15		
Private Pay Funded Residents	20. 8	16. 3	1. 28	23. 6	0. 88	22. 2	0. 94	22. 0	0. 95		
Developmentally Disabled Residents	0. 0	0.8	0.00	1.0	0.00	0.8	0.00	7. 6	0.00		
Mentally Ill Residents	50. 0	<b>50.</b> 0	1.00	36. 3	1. 38	38. 5	1.30	33. 8	1. 48		
General Medical Service Residents	20. 8	17.8	1. 17	21. 1	0. 99	21. 2	0. 98	19. 4	1. 07		
Impaired ADL (Mean)	50. 4	43. 4	1. 16	47. 1	1. 07	46. 4	1.09	49. 3	1. 02		
Psychological Problems	47. 9	61.6	0. 78	49. 5	0. 97	52.6	0. 91	51. 9	0. 92		
Nursing Care Required (Mean)	6. 4	8. 4	0. 76	6. 7	0. 95	7.4	0. 86	7. 3	0. 87		